

40th Universal Periodic Review of human rights: UK statement on Moldova

World news story

The UK delivered this statement during Moldova's Universal Periodic Review (UPR) at the Human Rights Council.



The Universal Periodic Review takes place in Geneva.

The United Kingdom welcomes steps taken by the Republic of Moldova to promote and protect human rights. We recognise the priority given to reforming the justice sector and we urge Moldova to show regard for proportionality and due process whilst carrying out these reforms.

We note Moldova's efforts to address human rights abuses by the de facto authorities in the Transnistrian region. We share the Government's concerns, including over impunity of law enforcement operatives, silencing of opposition voices, and continued pressure on Latin Script Schools.

The UK remains concerned about prison conditions in Moldova and we urge the Government to improve the conditions in line with international standards.

We recommend Moldova:

1. Ratify and implement the Protocol of 2014 to the ILO Forced Labour Convention 1930;
2. Guarantee the right to freedom of expression by ensuring the media regulator and Competition Authority function correctly and objectively, and by ensuring that the state broadcaster, Teleradio Moldova, provides space and a platform for an objective, balanced, national conversation on political issues by all;

3. Proactively demonstrate commitment to human rights and encourage greater awareness of, and support for, universal human rights throughout Moldova, including in the Transnistrian region

Thank you.

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150th Session of the WHO Executive Board: Joint statement on Prevention and Response to Sexual Exploitation and Abuse and Sexual Harassment

Thank you Chair.

I am honoured to deliver this statement on behalf of Japan, Israel, Australia, New Zealand, Norway, the EU and its Member States, South Africa, Monaco, the United States, the Philippines, Canada, Montenegro, Rwanda, Switzerland, Thailand, Albania, Singapore, Mexico, Costa Rica, Peru, Republic of Korea, Fiji, Indonesia, Ecuador and my own country, the United Kingdom

We welcome the progress made by WHO in tackling sexual exploitation and abuse and sexual harassment, primarily in the latter part of 2021. We commend your efforts and welcome the acknowledgement that there is still much more to be done: there are collective challenges we need to address, risks we must manage and lessons we must all learn. We welcome the constructive dialogues at the governing bodies meetings, and hope to see sustained senior management engagement on this matter, to strengthen WHO's approach and ensure zero tolerance for inaction.

Chair,

We fully endorse the five priority areas identified by the IOAC Sub-Committee in their report to this Executive Board. We ask that they be integrated into the SEAH Workplan and the IE0AC matrix for monitoring their implementation.

The scale of WHO's work in humanitarian contexts has grown rapidly in recent years. While the specific risks of working in these contexts are well known, WHO's capacity to manage them effectively has not kept pace. The SEAH Workplan must accelerate the expansion of WHO's workforce and capacity-building to address these challenges, including for the design and implementation of effective complaints mechanisms, cooperation with trusted

implementing partners, and for addressing gender imbalance in emergency operations.

Chair,

A victim- and survivor-centred approach must be the ultimate guide for WHO's work on SEAH. Support to victims and survivors must be tailored and sustained; complaints must be promptly, safely and appropriately addressed; and perpetrators must be held to account. WHO should ensure it has sufficient capacity at all levels, focused on preventing SEAH; processing and investigating reports; and supporting victims and survivors.

An investigative system that promotes transparency while also guaranteeing adequate due process for subjects of concern is essential to building trust and integrity in WHO's processes. We request regular updates, including at governing bodies, on the processes WHO is putting in place, including the package of support offered to victims and survivors.

WHO must ensure and promote a safe, equal and inclusive working environment for all its personnel. With this in mind, action on sexual exploitation and abuse, and sexual harassment, must be aligned, since all are rooted in the same power imbalances and gender inequalities that give rise to unacceptable behaviour across the spectrum of sexual misconduct and crimes. Both deeply undermine the important work being carried out by WHO, and must be addressed both in its work in communities as well as within the Organisation itself.

We would welcome regular updates from WHO, including to the governing bodies, on actions being taken to bring SEA and SH policies together, in line with the 2019 DAC Recommendation.

Finally, current efforts to engage in SEAH inter-agency initiatives are encouraging. We expect to see ever-stronger inter-agency collaboration, in line with United Nations Development System Reform, and working alongside the Office of the Victims' Rights Advocate and the Office of the Special Coordinator on Preventing SEA.

We hope this will help to ensure UN and international health agencies learn from each other on an ongoing basis, and bring greater consistency across agencies in performance measurement of their leaders for improved safeguarding against SEAH.

It is in everyone's interest that all WHO personnel act with utmost integrity both among colleagues and in the communities they serve. Safeguarding against sexual exploitation and abuse and sexual harassment is everyone's responsibility.

Thank you Chair.

Joint outcome statement: India-UK round one FTA negotiations

News story

Round one of negotiations for a free trade agreement between the Republic of India and the United Kingdom



Today, Friday 28th January 2022, the Republic of India and the United Kingdom concluded the first round of talks for an India-UK Free Trade Agreement (FTA). Both sides acknowledge the importance of ensuring this first round – held virtually over 2 weeks – could proceed despite the challenges presented by the COVID pandemic.

During this round, technical experts from both sides came together for discussions in 32 separate sessions covering 26 policy areas including: Trade in Goods, Trade in Services including Financial Services & Telecommunications, Investment, Intellectual Property, Customs and Trade Facilitation, Sanitary and Phytosanitary Measures, Technical Barriers to Trade, Competition, Gender, Government Procurement, SMEs, Sustainability, Transparency, Trade and Development, Geographical Indicators and Digital.

The negotiations were productive and reflected our shared ambition to secure a comprehensive deal to boost trade between the 5th and 6th largest economies in the world. The positive discussions in round one have laid the groundwork for the UK and India to make positive and efficient progress.

The second round of negotiations is due to take place on 7-18 March 2022. Both teams maintain a shared ambition to conclude negotiations by the end of 2022 – as part of both sides' efforts to secure a comprehensive agreement, Chief Negotiators will continue to consider the benefits of an Interim Agreement.

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The UK Foreign Affairs Committee visits Bosnia and Herzegovina

The UK Parliament's Foreign Affairs Committee (FAC) visited Bosnia and Herzegovina (BiH) between 26 to 28 January 2022, to gain a first-hand insight into the current situation in BiH.

They spoke to a range of actors about the situation in the country, the continuing threats to peace and stability, and the prospects for returning to constructive dialogue. As well as talking to representatives of civil society and media, the delegation met elected officials including the BiH Presidency members, BiH Ministers of Foreign Affairs, Security and Defence, and the mayors of Mostar, Sarajevo and Tuzla.

The delegation also met key international partners involved in supporting the local safe and secure environment and supporting work on BiH's Euro-Atlantic path including the High Representative and NATO HQ Sarajevo Commander.

British Ambassador to BiH Matt Field said:

The visit of this influential committee is yet another sign of the UK's firm commitment to the security, stability and wellbeing of BiH.

We have a great depth of knowledge and expertise in the UK Parliament and in recent months we have seen them take a strong interest in developments in BiH, including several dedicated debates and many parliamentary questions.

The Foreign Affairs Committee members were here to meet a wide range of people, to see and hear for themselves, to better understand the context and how the UK can support positive change. The UK has been, and remains, a firm friend of this country.

The current trajectory should concern all those who care for peace, regional security and the protection of human rights. We remain committed to the future of BiH. We cannot and will not allow hostile actors to pull apart this country, nor to undo the progress of the last 26 years.

Tom Tugendhat, Chair of the FAC said:

For 30 years the UK has been committed to the security and prosperity of the people of this great country. This visit is part of the series of engagements, that the UK Parliament is organising,

demonstrating our firm interest in BiH and the wider region.

While recognising the serious challenges that some actors, external and internal, still bring, we were very encouraged to see the work of civil society, independent media, and leaders at the local level. We will take back with us ideas and proposals for how the UK can do more to help the forces of good in BiH.

Second ground-breaking antiviral to be deployed to country's most vulnerable

- PF-07321332+ritonavir will be made available to those with weakened immune systems from Thursday 10 February
- Innovative treatment reduced the risk of hospitalisation or death by 88% in clinical trials
- The UK has procured more antivirals per head than any other country in Europe with over 4.98m courses ordered so far

Thousands of the country's most vulnerable will be able to access the UK's second ground-breaking antiviral – Pfizer's PF-07321332+ritonavir (Paxlovid®) – from Thursday 10 February, the government has announced today.

Those at highest risk who test positive for the virus – for example, people who are immunocompromised, cancer patients or those with Down's Syndrome – could access PF-07321332+ritonavir directly. The antiviral molnupiravir and monoclonal antibody sotrovimab are already being deployed to the highest risk patients with nearly 10,000 patients being treated to date.

PF-07321332+ritonavir reduced the relative risk of COVID-19-associated hospitalisation or death by 88% in those who received treatment within five days of symptoms appearing – meaning it could potentially save thousands of lives and help to ease burdens on the NHS. This is a significant development for those with compromised immune systems, for whom the vaccine can be less effective.

The government, through the Antivirals Taskforce, has procured 4.98 million courses of antivirals – 2.75 million courses of PF-07321332+ritonavir and 2.23 million courses of molnupiravir – more per head than any other country in Europe.

The PANORAMIC study is currently open and deploying the antiviral molnupiravir to patients. Anyone over the age of 50 or between 18 to 49 with certain underlying health conditions can sign up to the study as soon as they receive a positive PCR or lateral flow test result. They need to be experiencing COVID-19 symptoms that began in the last five days to be

eligible to enrol.

Further details on wider deployment – including potentially through the PANORAMIC study run by the University of Oxford and supported by the National Institute for Health Research (NIHR) – will be set out in due course.

Health and Social Care Secretary Sajid Javid said:

Our pharmaceutical defences are crucial as we learn to live with COVID-19 and the UK is leading the way, especially when it comes to the use of cutting-edge antivirals.

This is an important milestone – especially as Paxlovid® has been shown in clinical trials to reduce the risk of hospitalisation or death for vulnerable patients by 88%, meaning potentially thousands of lives could be saved.

We will set out further details on access to the new antiviral soon – until then, anyone who is eligible who tests positive for COVID-19 and has symptoms should sign-up to the PANORAMIC trial for the chance to receive our other antiviral, molnupiravir.

Those in the highest risk group have been informed by the NHS if they have a condition that will make them eligible to receive these treatments, should they test positive for COVID-19.

The eligible cohorts have been determined by an independent expert group commissioned by the Department of Health and Social Care and included in a clinical policy agreed by all four Chief Medical Officers in the UK.

The UK Health Security Agency (UKHSA) has sent priority PCR tests to around 1.3 million people thus far to support rapid turnaround of results so they can access the treatments as soon as possible after symptoms begin.

Eligible patients who receive a positive test will be assessed over the phone by an expert clinician from an NHS COVID Medicines Delivery Unit (CMDU), who will review and discuss with the patient what the most appropriate treatment would be for them.

Those being prescribed a monoclonal antibody treatment will be invited to attend the CMDU, while those receiving PF-07321332+ritonavir can either get someone to collect it for them or have it delivered to their home. The NHS has been setting up CMDUs since the summer.

NHS National Medical Director Professor Stephen Powis said:

It is fantastic news that this new treatment, the latest cutting-edge drug that the NHS is rolling out through new COVID-19 medicine delivery units, will now be available to help those at highest risk of COVID-19.

Trials have shown it can reduce hospitalisation and risk of death by 88%, meaning we'll be in the best position to save thousands of lives.

While it will still be up to clinicians to decide on a case-by-case basis whether this treatment, or indeed other COVID-19 medicines, is the best choice for their patients, it is an important step in our fight back against COVID-19.

Chair of the Antivirals Taskforce Eddie Gray said:

The UK has secured millions of doses of antivirals for NHS patients, so we can keep the most vulnerable safe from the virus.

This is a promising development in deployment of these treatments. The Taskforce will continue our work to identify the world's best antiviral treatments for UK patients.

Remdesivir will also be rolled out through this route – a broad-spectrum antiviral administered through a drip.

PF-07321332+ritonavir was approved by the Medicines and Healthcare Products Regulatory Agency (MHRA) in December 2021.